## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000038031

**FILED** Feb 28, 2007 08:00 AM Secretary of State

1. Entity Name KIMARK INC.							
Principal Place of Business 28651 NORTH DIESEL DRIVE BONITA SPRINGS, FL 34135	Mailing Address P.O.BOX 1956 BONITA SPRINGS, FL 34133		1 111 1110 111			11   F.B.	
DO NOT WRITE IN THIS SPAC			01312007 4. FEI Numbe 54-210	No Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional Fee Required		
LONG, KENNETH 25630 SPRINGTIDE COURT BONITA SPRINGS, FL 34135			DO NOT WRITE IN THIS SPACE				
The above named entity submits this statement for the obligations of registered agent.  SIGNATURE  Signature, typod or printed name of registered agent and account to the control of		****	istered agent, or bol	th, in the State of Flo	rida. I am fan DATE	nilar with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	Election Campaign Finar     Trust Fund Contribution		\$5.00 May Be Added to Fees				
10. OFFICERS AND DI TITLE P NAME STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS, FL 34135 TITLE NAME STREET ADDRESS	RECTORS				)651059 -80040-0	02 150.00	

OF THE PORT

U3/U3/U7-80040-002 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is fue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

G OFFICER OR DIRECTOR

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